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FEC FORM 3X

Only

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

2013 OCT 28 PM 12: 31

FEGREM ANION CENTER

1.	NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If over the line	typing, type 🚆	12FE4M5	and the second
#	APHAK AME			<u>. </u>	1 1 1 1 1 1 1 1	
ADI	DRESS (number and street)	7316 Fil	bert L	BARIL		
,	Check if different			1111		
දීකය	than previously reported. (ACC)	TAMPA	<u> </u>		FL 336	37 -
2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲						
	C005240	<i>58</i> 3	REPORT	NEW (N) OR	AMENDED (A))
4.	TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	in (Non-⊨lection
	(a) Quarterly Reports:	Due On:	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Year Only) Dec 20 (M12) (Non-Election Year Only)
	April 15	- Sweet	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10	Power Co.
	Quarterly Report	(C) 12-Day	Primary	(12P)	General (12G)	Runoff (12R)
	Quarterly Report October 15 Quarterly Report	(Q2) Report for the	grang.	on (12C)	Special (12S)	
	Quarterly Report January 31 Year-End Report		ection on	[/ [] *] / [in the State of
	July 31 Mid-Year Report (Non-elect Year Only) (MY)	POST-Election	iE	(30G)	Runoff (30R)	Special (30S)
	Termination Repo		e: ection on	/ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	~ · · · · · · · · · · · · · · · · · · ·	in the
5.	Covering Period	7 07 20	13 through	gh 09	30 20	73
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer						
Signature of Treasurer Date Date Date Date Date Date						
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.						
	Office Use					C FORM 3X Rev. 12/2004